* Post Graduate Institute of Medical Education & Research, Chandigarh.
* King George Memorial Medical College, Lucknow.
* Vaidya Hospital, Goa.
* JN Cancer Hospital, Bhopal.
* Indira Gandhi Institute of Cardiology, Patna.
* A.H. Regional Cancer Centre, Cuttack.
* Bhagwan Mahavir Cancer Hospital, Jaipur.
* HM Patel Centre for Medical Care and Education, Karamsad, Gujarat.

The estimated expenditure will be approximately Rs. 10-11 lakhs per clinic for a period of one year.

TB infected persons in Karnataka

820. SHRI K.C. KONDAIAH: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the estimated number of persons infected by Tuberculosis in Karnataka every year;

(b) whether Karnataka is fully covered under the DOTS programme;

(c) whether Government intend to involve medical colleges in Karnataka in the TB Control Programme;

(d) if so, the details thereof; and

(e) the steps taken by Government for the dissemination of information and spread of awareness regarding TB in Karnataka?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFAE (SHRI A. RAJA): (a) Under the National TB Control Programme, on an average approximately 27,000 sputum positive cases of TB are being reported in the State of Karnataka every year.

(b) No, Sir. At present 9 districts of Karnataka are covered under

the DOTS Programme. It is envisaged to cover 1 more distict of Karnataka under the DOTS Programme in the current year.

(c) and (d) Yes, Sir. It is planned to establish microscopy cum DOT centers in medical colleges and one Medical Officer, one Senior TB Lab. Supervisor, one Lab Technician and one TB Health visitor will be appointed on contractual basis in each of such microscopy-cum-DOT centres.

(e) For the dissemination of information and spread of awareness regarding TB, IEC activities are decentralized and are taken up at the District level by the district TB Control Societies using various methods of communication. Fund are provided to the District TB Societies for this purpose.

Appointment of local chemists under CGHS

821. SHRI K.M. SAIFULLAH: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that the CGHS has introduced a scheme for its beneficiaries under which a chemist is authorized to issue medicines for patients of a number of dispensaries even though the chemist is located at a far-off place;

(b) whether under this scheme a patient has to go to that far-off chemist for obtaining medicines and thus putting the patient to inconvenience; and

(c) if so, whether Government would revise this scheme and authorize more chemists to supply medicines to CGHS beneficiaries?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) The CGHS for the past few years has been appointing authorised local chemists for supplying such medicines to the CGHS dispensaries which are not available in the stock of the dispensaries and this helps the beneficiaries in timely supply of the medicines. Fresh tenders were invited by the CGHS for appointment of local chemists and to avoid inconvenience to the beneficiaries. In the fresh tenders 4 to 5 CGHS